Data Points

Department Web Address Change

The Departments web address has changed to http://www.mhmr.ky.gov. If you have a link to the Department's site on your region's web site, please change the link to point to the new address.

Request for Staff ID's

Please send the Staff ID's of all of your region's KIDS NOW-Early Childhood staff to Beth Armstrong (Beth.Armstrong@ky.gov) as soon as possible.

Traumatic Brain Injury Report

At the May 19th JCIC meeting, Colleen Ryall discussed her concerns that the Traumatic Brain Injury field is being underreported; the regions requested a report showing their Clients who have this marker. A Traumatic Brain Injury report was e-mailed to all regions on May 21st. Please let Colleen Ryall (Colleen.Ryall@Ky.Gov) know if you have any questions or if you see that any major changes are needed.

Client Field Review

This was sent to all regions via e-mail on May 21st:
At the 5/19 JCIC meeting, Dennis Moore mentioned that we were reviewing several Client fields to allow us to track when the Client records are updated.
The first list is fields that should *not* change, except maybe once for correction or update:
4   Date of Birth
5   Sex
6   Client Status Code
10   Race
11   Hispanic Origin

The second list is fields we are checking and *expect* to see changes in:
12   Education
13   Veteran Status
14   Marital Status
15   Employment Status
17   SSI or SSDI
18   Primary Source of Income/Support
19   Living Arrangements

21	County of Residence
39	Primary Diagnosis Indicator
40	Severe Mental Illness (SMI or CMI)
41	Severe Emotional Disability (SED)
42	Methadone
43	IV Drug User
44	Co-Dependent/Collateral
45	DUI Conviction
46	Developmental Disability/Developmental Delay
48	Victim of Rape/Sexual Assault/Sexual Abuse
49	Victim of Domestic Abuse
50	Perpetrator of Rape/Sexual Assault/Sexual Abuse
51	Perpetrator of Domestic Abuse
52	Pregnant Women
53	Pregnant Women - Due Date
54	Women with Dependent Children
56	Substance Abuse Prior Episode
58	Drug Type Code, Primary at Admission
70	Deaf and Hard of Hearing
71	Traumatic Brain Injury
72	Homeless Indicator

Please let Dennis Moore (dennis.moore@rdmc.org) know if you feel fields should be added or removed from either of these lists.

This method of checking to see which client records have been updated is just one option. Another method that has been suggested is to have an Update Date field. This field would have to be closely defined. If a client indicates that he/she just got married, and you change the Marital Status field, would you change the Update Date field or wait until you verify all the demographic fields? Or would the Update Date field be the date on which someone confirmed the accuracy of all the fields with the client?

Also, we need an acceptable percentage range for each of the fields that could/should change. Maybe we need to look at different groupings of clients for different fields (e.g., all clients between ages 6 and 20 for Education, all female clients between ages 15 and 45 for Pregnant Women, etc.). This is a work in progress and any help would be appreciated. Let Dennis Moore (Dennis.moore@rdmc.org) know if you have any ideas on this issue.

Event Field Review

This was sent to all regions via e-mail on May 21st:
Participants at the 5/19 JCIC meeting discussed several Event fields that may no longer be needed. Here is a list of the fields we are studying as well as JCIC's recommendations. Please review and send Dennis Moore (dennis.moore@rdmc.org) or Janice Lunsford (janice.lunsford@ky.gov) any comments regarding the fields. Should we keep them, remove them, or study them further?

DAO-05   Source of Pay
Rationale: Up to 3 Sources of Pay can be entered for any single record but we are finding that HIPAA only allows one Pay source per claim without a great deal of difficult programming, so we probably won't get anything except the first Source of Pay after everybody converts to HIPAA. At this point, only one region submitted more than one source of pay and they stopped when they converted to HIPAA.
Recommendation: Reduce to one source of pay vs. three.

CAO-29   Claim ID Number
Rationale: ID number is designed to make each record unique. The system generates this number, so the regions do not have to submit it. The February Data Points had a proposal to drop this field. No one has commented yet on that proposal.
Recommendation: Delete

EA0-26   Admission Date
Rationale: This must be a valid date. Currently, only one region is having a problem with this field. The Service from Date and Service to Date fields are used to determine the service / event date, so this date does not seem to be necessary. Lou Kurtz wants to study this further to see if it will be needed for reporting CSU service duration.
Recommendation: Study further.

DA0-06   Insurance Type Code
Rationale: If the payer is Medicaid, this field must match one list of valid codes and if the payer is DMHMRS, this field must match another list of valid codes. This does not seem to be used in any reports or programs.
Recommendation: Study further.

DA0-28   Medicaid ID Number
Rationale: If the payer is Medicaid, this field may not be blank (any value is accepted). The instructions say "Must be a valid Medicaid Provider ID." Four regions submit a SSN with a 10th digit, 6 regions use a few (1-7) standard numbers, one region uses a 3-digit number and one region (13) submits blanks in this field. The other regions do not submit any Events with a Medicaid payer. We can use the payer to determine if the event is a Medicaid service, if needed. This does not seem to be used in any reports or programs.
Recommendation: Delete

FA0-09   HCPCS Procedure Code
Rationale: The edit on this field is very complicated (and, I am sure, the regions find it difficult to load the correct value). If the payer is DMHMRS, then this field may be blank, match the FA0-12 (DMHMRS Modifier) field or be a valid CPT code. If the payer is Medicaid, then this field must contain a valid Medicaid code. For any other payer, this field must contain a valid HCPCS code or a valid CPT code. Many of the errors seem to be when this field is left blank (only acceptable when the payer is DMHMRS) or where the payer is DMHMRS and the field does NOT match the FA0-12 field or the payer is Other and the value either matches the FA0-12 field or is a Medicaid code (should be a HCPCS or CPT code). This does not seem to be used in any reports or programs.
Recommendation: Study further